

ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		2-12-09
O.I.P.E. CLASSIFIER	DR	32	2/24
FORMALITY REVIEW	H.T.	117	8/27/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

- ✓ Rejected
- Allowed
- (Through numeral)... Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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3/23/01
5C-57
10/31/01